

**To the United States Bankruptcy Court
Southern District of New York**

**In re LEHMAN BROTHERS HOLDINGS, INC. et al, Debtors
Chapter 11 Case No. 08-13555 (JMP)**

Re: Response to Objection to Claim No. 7082

I recently received notice indicating that my claim #7082 for previously agreed upon severance would be disallowed and expunged *"on the ground that it was filed against the Debtors asserting claims for compensation arising out of your employment with entities that are not Debtors in these chapter 11 cases"*.

As I understand, in lay terms, this means that my claim for unpaid severance will be disallowed and expunged because I submitted the claim as against LBHI which apparently was not the proper entity for the payment of severance claims.

Please accept this letter as my response to the objection, and as a request for my claim to be reclassified and filed against the proper Lehman entity that is considering severance claims against Lehman Brothers.

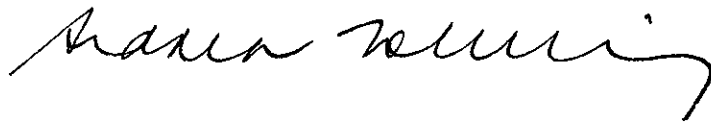
I am not a lawyer nor do I have any background in bankruptcy proceedings or law. I received several claim forms after the bankruptcy was filed and was genuinely confused on which one to fill out. I relied upon and completed the only claim form that already had my name and correct severance amount pre-populated on the form, figuring this was correct. And then I mailed the executed claim form to the entity at the top of the form – Lehman Brothers Holdings. Based on the information I was provided, there was no reasonable basis to believe that Lehman Brothers holdings could be the wrong entity to which I should send the claim. In some ways, it was deceptive that the bankruptcy entities should exploit an already confusing situation by not providing more clarity on which form to fill out.

I suspect that there are many other former employee claimants who transacted similarly, suggesting that the high level of scrutiny on "Inc." vs. "Holdings", vs. any other LB entity is not something your regular employee considers. I relied upon the proof of claim form that seemed most appropriate – the pre-populated one – and sent it in in a timely manner. Had I been provided with the proper information, I would have certainly filed with the proper entity – after all, it was not a complicated forms process. I also understand that certain claim forms that were misdirected (e.g. forms that were mistakenly sent as customer claims to LBI, were automatically reclassified by Counsel to the employee claims). If this is correct, then why not allow for reclassifications like my own? They were presumably all based on the same root cause – a true misunderstanding by a lay employee on what form to fill out.

I would respectfully request that the objection to my claim be denied and that my claim be reclassified as against the proper entity – which as I understand right now, to be Lehman Brothers Inc.

CREDITOR:

Andrea Tolchinsky
119 Chestnut Hill Road
Wilton, CT 06897
Tel: 203-563-9921



CLAIM NUMBER: 7082

DATE FILED: 8/3/2009

DEBTOR: 08-13555

CLASSIFICATION AND AMOUNT:

Unsecured: \$140,658.90 unliquidated

COPIES OF THIS LETTER ALSO SENT TO:

- 1) Honorable James M. Peck, One Bowling Green, NY, NY 1004; Courtroom 601
- 2) Attorneys for the Debtor, Weil Gotshal & Manges, LLP, 767 Fifth Avenue NY, NY 10153 (Attn: Shai Wiseman, Esq. and Mark Bernstein, Esq.)
- 3) Office of the US Trustee for Region 2, 33 Whitehall Street, 21st Floor, NY, NY 10004 (Attn: Tracy Hope Davis, Esq., Elisabetta Gasparini, Esq. and Andrea Schwartz, Esq.)
- 4) Attorneys for the Official Committee of Unsecured Creditors, Millbank, Tweed & McCloy LLP, 1 Chase Manhattan Plaza, NY, NY 10005 (Attn: Dennis F. Dunne, Esq., Dennis O'Donnell, Esq. and Evan Flock, Esq.)

United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		<h2 style="margin: 0;">PROOF OF CLAIM</h2>	
In Re: Lehman Brothers Holdings Inc., et al. Debtors.	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	UNIQUE IDENTIFICATION NUMBER: 555339800	
Name of Debtor Against Which Claim is Held LEHMAN BROTHERS HOLDINGS, INC.	Case No. of Debtor 08-13555 (JMP)	Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000007082	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503. Additionally, this form should not be used to make a claim for Lehman Programs Securities (See definition on reverse side.)			
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor) LBH (MERGE2.DBF, SCHED_NO) SCHEDULE #: 555339800***** TOLCHINSKY, ANDREA 119 CHESTNUT HILL ROAD WILTON, CT 06897		<input type="checkbox"/> Check this box if you are aware that this claim amends a previously filed claim.	NOTICE OF SCHEDULED CLAIM: Your Claim is scheduled by the indicated Debtor as:
Telephone number: 203 5639921 Email Address: agtolchinsky@gmail.com		Court Claim Number: _____ (If known)	
Name and address where payment should be sent (if different from above) (same as above)		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	\$140,658.90 UNSECURED UNLIQUIDATED CONTINGENT
Telephone number: _____ Email Address: _____		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	DESCRIPTION: OUTSTANDING SEVERANCE
1. Amount of Claim as of Date Case Filed: \$ <u>\$140,658.90</u> If all or part of your claim is secured, complete Item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete Item 5. If all or part of your claim qualifies as an Administrative Expense under 11 U.S.C. §503(b)(9), complete Item 6.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim:	
<input type="checkbox"/> Check this box if all or part of your claim is based on a Derivative Contract.* <input type="checkbox"/> Check this box if all or part of your claim is based on a Guarantee.* *IF YOUR CLAIM IS BASED ON AMOUNTS OWED PURSUANT TO EITHER A DERIVATIVE CONTRACT OR A GUARANTEE OF A DEBTOR, YOU MUST ALSO LOG ON TO http://www.lehman-claims.com AND FOLLOW THE DIRECTIONS TO COMPLETE THE APPLICABLE QUESTIONNAIRE AND UPLOAD SUPPORTING DOCUMENTATION OR YOUR CLAIM WILL BE DISALLOWED.		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries or commissions (up to \$10,950), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Up to \$2,425 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____).	
<input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of interest or additional charges. Attach itemized statement of interest or charges to this form or on http://www.lehman-claims.com if claim is based on a Derivative Contract or Guarantee.		Amount entitled to priority: \$ _____	
2. Basis for Claim: <u>See above</u> (See instruction #2 on reverse side.)		FOR COURT USE ONLY <div style="border: 2px solid black; padding: 10px; text-align: center;"> FILED / RECEIVED AUG 03 2009 EPIQ BANKRUPTCY SOLUTIONS, LLC </div>	
3. Last four digits of any number by which creditor identifies debtor: <u>3732</u> 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)			
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____			
6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C. §503(b)(9): \$ _____ (See instruction #6 on reverse side.)		7. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 8. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages and security agreements. Attach redacted copies of documents providing evidence of perfection of a security interest. (See definition of "redacted" on reverse side.) If the documents are voluminous, attach a summary. DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:	
Date: 7/26/09 Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. 			
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.			

To: Lehman Brothers Holdings Inc. 08-13555
Creditor: Andrea Tolchinsky.

I am claiming \$140,658.90 for unpaid
and outstanding severance as noted in
the proof of claim form that was generated.
and sent to me.

Thank you.

